JUL 1 5 WILLS

CHANGE OF CORRESPONDENCE ADDRESS Application

Address to:

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

| Application Number | 09/696,863 | |
|------------------------|------------------|--|
| Filing Date | October 25, 2000 | |
| First Named Inventor | Yamazaki, et al. | |
| Group Art Unit | 2881 | |
| Examiner Name | Nikita Wells | |
| Attorney Docket Number | 07977-150003 | |

| <u></u> | | | | | |
|---|--|---------|------------------|----------------|--|
| Please change the Correspondence Address for the above-identified application to | | | | | |
| | Custo | omer No | 5 : 26171 | | |
| ☐ Firm <i>or</i> Individual N | John F. Hayden Name | | | | |
| Address | | | | | |
| Address | | | | | |
| City | | State | | Zip | |
| Country | United States of America | | | • | |
| Telephone | (202) 783-5070 | Fax | (202) 78 | 83-2331 | |
| This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). | | | | | |
| I am the : | Applicant/Inventor. | | | | |
| Assignee of record of the entire interest. Certificate under 37 CFR 3.73(b) is enclosed. | | | | | |
| \boxtimes | Attorney or agent of record. | | | | |
| | Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number 37,640 | | | | |
| Typed or Printed Name | John F. Hayden | | | | |
| Signature | | | | | |
| | | Telepho | | (202) 783-5070 | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. *Total of 1 forms are submitted. | | | | | |